 CD-171300	NEW MEXICO CORRECTIONS DEPARTMENT	ISSUE DATE: 01/03/92 EFFECTIVE DATE: 01/03/92 REVIEW/REVISED: 03/09/05
	TITLE: Level I and Level II Custody Placements of Inmates with Mental Disorders	

AUTHORITY:

NMSA 1978, Section 33-1-6 and 33-2-44, as amended and Chapter 43 *Commitment Procedures*

REFERENCES:

- A. ACA Standard 2-CO-4B-04, *Manual of standards for the Administration of Correctional Agencies*, 1993.
- B. ACA Standards 4-4370, 4-4371, 4-4363, 4-4363-1, 4-4372, and 4-4399 (Health Care); *Manual of Standards for Adult Correctional Institutions*, 4th Edition.
- C. National Commission on Correctional Health Care, *Standards and Guidelines for Delivering Services*, 1999.

PURPOSE:

To ensure continuity and consistency of mental health care provided to inmates with identified mental disorders that are transferred to minimum-restrict and/or minimum-security facilities.

APPLICABILITY:

All employees and inmates of the New Mexico Corrections Department, especially to Health Services personnel, contract health care providers and all employees assigned to duties that are directly related to the provision of mental health services.

FORMS:

None

ATTACHMENTS:

None

DEFINITIONS:

None

POLICY:

The NMCD Medical and Mental Health Departments will develop and maintain policies, procedures and protocols designed to ensure that mentally-disordered offenders, housed in Level I or Level II facilities, receive appropriate services.

- A. The agency shall provide guidance and resources to establish and maintain special services and programs for persons with specific types of problems. Documentation shall be maintained to reflect this guidance. **[2-CO-4B-04]**
- B. All intersystem and intrasystem transfer offenders will receive an initial mental health screening at the time of admission to the facility by mental health trained or qualified mental health care personnel. The mental health screening includes, but is not limited to: **[4-4370]**
 - 1. whether the offender has a present suicide ideation
 - 2. whether the offender has a history of suicidal behavior
 - 3. whether the offender is presently prescribed psychotropic medication
 - 4. whether the offender has a current mental health complaint
 - 5. whether the offender is being treated for mental health problems
 - 6. whether the offender has a history of inpatient and outpatient psychiatric treatment
 - 7. whether the offender has a history of treatment for substance abuse

Observation of:

- 1. general appearance and behavior
- 2. evidence of abuse and/or trauma
- 3. current symptoms of psychosis, depression, anxiety, and/or aggression

Disposition of offender:

- 1. to the general population
 - 2. to the general population with appropriate referral to mental health care service
 - 3. referral to appropriate mental health care service for emergency treatment
- C. All intersystem offender transfers will undergo a mental health appraisal by a qualified mental health person within 14 days of admission to a facility. If there is documented evidence of a mental health appraisal within the previous 90 days, a new mental health appraisal is not required, except as determined by the designated mental health authority. Mental health examinations include, but are not limited to; **[4-4371]**

1. assessment of current mental status and condition
 2. assessment of current suicidal potential and person-specific circumstances that increase suicide potential
 3. assessment of violence potential and person-specific circumstances that increase violence potential
 4. review of available historical records of inpatient and outpatient psychiatric treatment
 5. review of history of treatment with psychotropic medication
 6. review of history of psychotherapy, psycho-educational groups, and classes or support groups
 7. review of history of drug and alcohol treatment
 8. review of educational history
 9. review of history of sexual abuse-victimization and predatory behavior
 10. assessment of drug and alcohol abuse and/or addiction
 11. use of additional assessment tools, as indicated
 12. referral to treatment, as indicated
 13. development and implementation of a treatment plan, including recommendations concerning housing, job assignment, and program participation
- D. All intrasystem transfer offenders receive a health screening by health-trained or qualified health care personnel which commences on their arrival at the facility. All findings are recorded on a screening form approved by the health authority. At a minimum, the screening includes the following: **[4-4363]**

Inquiry Into:

1. whether the offender is being treated for a medical or dental problem
2. whether the offender is presently on medication
3. whether the offender has a current medical or dental complaint

Observation of:

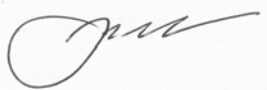
1. general appearance and behavior
2. Physical deformities
3. evidence of abuse or trauma

Medical disposition of offender:

1. to general population
2. to the general population with appropriate referral to mental health care service
3. referral to appropriate health care service for emergency treatment

- E. Early identification and treatment of offenders with alcohol and drug abuse problems through a standardized battery assessment. This battery shall be documented and include at a minimum, the following: **[4-4363-1]**
1. screening and sorting
 2. clinical assessment and reassessment
 3. medical assessment for appropriate drug and alcohol program assignment to the needs of the needs of the individual inmates
 4. referrals
- F. Offenders referred for mental health treatment will receive a comprehensive evaluation by a licensed mental health professional. The evaluation is to be completed within 14 days of the referral request date and include at least the following: **[4-4372]**
1. review of mental health screening and appraisal data
 2. direct observations of behavior
 3. collection and review of additional data from individual diagnostic interviews and tests assessing personality, intellect, and coping abilities
 4. compilation of the individual's mental health history
 5. development of an overall treatment/management plan with appropriate referral to include transfer to mental health facility for offenders whose psychiatric needs exceed the treatment capability of the facility.
- G. There is consultation between the facility and program administrator (or designee) and the responsible clinician (or designee) prior to taking action regarding chronically ill, physically disable, geriatric, seriously mentally ill, or developmentally disabled offenders in the following areas: **[4-4399]**
1. housing assignments
 2. program assignments
 3. disciplinary measures
 4. transfers to other facilities

When immediate action is required, consultation to review the appropriateness of the action occurs as soon as possible, but no later than 72 hours.



Joe R. Williams, Secretary of Corrections
New Mexico Corrections Department

03/09/05
Date